CLAIMS ONLY

Application Number	Filing Date
10/719021	
Applicant(s)	

05-31-06

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1			/				51					
2			=	=			52					
3				/			53					
4				/			54					
5			=	=			55					
6			/				56					
7				/			57					
8			=	=			58					
9				/			59					
10				/			60					
11			X	X			61					
12			X	X			62					
13			X	X			63					
14			X	X			64					
15			/				65					
16				/			66					
17				/			67					
18			/				68					
19				/			69					
20				/			70					
21				/			71					
22			/				72					
23				/			73					
24				/			74					
25				/			75					
26			/				76					
27				/			77					
28				/			78					
29				/			79					
30				/			80					
31			/				81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep			7				Total Indep					
Total Depend			17				Total Depend					
Total Claims			24				Total Claims					